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PUBLIC HEALTH REPORTS.

UNITED STATES.

[Reports to the Surgeon-General, Public Health and Marine-Hospital Service.]

Summary of work in Chinatown, San Francisco, for the week ended August 8, 1904.

The following is received from Passed Assistant Surgeon Blue, under date of August 6:

Week ended August 6.

Buildings reinspected	327
Rooms	2,759
Persons inspected	3,726
Sick inspected	12
Sick prescribed for at Oriental Dispensary	12
Dead examined	2
Necropsies	1
Rats examined bacteriologically	43
Number showing pest infection	0
Places limed and disinfected	713
Times streets swept	3
Sewers flushed	15
Sewers baited with rat poison	30
Blocks covered with Danyz virus	10
Notices sent to abate plumbing nuisance	7
Abated	4
Undergoing abatement	8
Total number plumbing inspections	127

Report on rats from city wharf and Chinese, Japanese, and Latin quarters, examined during the week ended July 30, 1904.

The following is received from Passed Assistant Surgeon Blue, under date of July 30:

Number caught alive	8
Number found dead	20
Number showing lesions of phosphorus poisoning	3
Number showing pest infection	0
Number showing infection with Danyz bacillus (<i>B. typhi murium</i>)	2

Beriberi on bark Fooing Suey, from Honolulu, at Delaware Breakwater quarantine.

Passed Assistant Surgeon Lavinder reports, August 3, as follows:

The American bark *Fooing Suey*, with sugar, 146 days out from Honolulu via Kahului, with a crew of 14 all told, arrived at this port July 25. Upon boarding the vessel I learned that a death had occurred among the crew at sea July 10, the cause of which the master thought

to be beriberi. The history of the case confirmed, in my opinion, the master's diagnosis. I then inspected the crew, finding 1 well-marked case of beriberi (wet form), 3 cases with unmistakable evidences of the disease, and several others complaining of some of the early symptoms of the disease, but with no physical evidences of it. Glandular examination was made of the crew, and, nothing suspicious being found, the vessel was granted pratique. The one well-developed case was admitted to the hospital at this station for treatment. All others proceeded with the vessel the next day bound for Philadelphia.

The case which was admitted to the hospital at this station displayed as his most marked symptoms and signs general oedema (anasarca), disturbed cardiac action, urgent dyspnea, tenderness of calf muscles, and muscular weakness. Since his admission he has progressed very favorably and is rapidly improving.

Health conditions at Gulfport—Enteric fever.

Surgeon Wertenbaker, at New Orleans, forwards the following report, received from health officer at Gulfport, under date of August 1:

Health conditions the same. We continue to remain as well as when I last reported, July 10; no deaths and no very sick cases. We have now 2 or 3 cases of typhoid, and this, with an occasional case of chills, constitutes the present illnesses.

Transactions on account of yellow fever at Laredo, Tex.—Summary of work at Laredo and New Laredo.

During week ended August 6, fumigated Laredo, 25 houses containing 102 rooms; inspected 7,303 premises; oiled 1,757 water containers and 14 ponds; maximum temperature, 101°; no rainfall. Cock and outfit arrived Brownsville 6th. MacGregor inspecting along line Texas-Mexican. New Laredo reports for August 1 to 6, 3,531 domiciliary visits, 161 containers sanitized, 67 containers oiled, and 12 premises cleared of rubbish.

Inspection of Gonzales, Luling, Marion, and Seguin—Sanitary conditions.

Acting Assistant Surgeon Purnell reports as follows:

LULING, TEX., August 1, 1904.

I visited Gonzales, reaching there at 2 o'clock yesterday afternoon, and, after inspecting the sanitary condition of the town, I left at 4 o'clock this afternoon. Gonzales is situated on the bank of the Guadeloupe River, and derives its water from this river. It has a population of between 4,000 and 5,000, the large majority of whom are white. The health of its citizens is ordinarily excellent, though malarial diseases prevail during some seasons, and at times assume a malignant form, haematuria being the most pronounced. This phase of malarial fever is denominated black jaundice in this section, and resembles yellow fever in many of its symptoms. From inquiry I am inclined to believe that there was no yellow fever here last season, as some suppose, but there were a number of cases of the so-called black jaundice. The sanitary condition of the town is good, and measures for the prevention of mosquito propagation are being prosecuted with good results,